



Clark Family Day Care
844 East 118th Place
Los Angeles, Ca. 90059
(323)756-7820

I _____ (parents name), parents/guardian of
_____ (child's name) comply will all of the following
rules and regulations of Clark Family Day Care.

1. Day Care Hours:

Monday-Friday

6:30am-6:00pm

24 hour care upon individual request

Additional hours may be arranged by provider only. Before and/or after care is \$1.00 per minute per child.

To ensure efficient transition through daily activities, we request each child be signed in for child care no later than 9:30am.

2. Ages:

Care is provided for children 6 weeks to 5 years of age. Before and after care as well as no school days are provided for school age children to 12 years of age.

3. Fees:

Fees are paid in full on a weekly basis, in advance on Friday for the following week. Fees may be paid bi-weekly or monthly on a consistent basis pre arranged with provider. Any fees paid after Friday at 6:00pm will incur a late fee of \$5.00 per day. There will be no service provided on Wednesday/ or until brought current. Before and/or after care is an additional \$1.00 per minute and must be paid on the day that service is rendered. For whatever reason it is not paid, it will incur a late fee of \$5.00 per day.

Total weekly fee is _____ per child. A child attending anything less than five days is required to pay full rate.

Each child is allowed two weeks vacation or sick time at one half of regular rate.

Checks:

Personal checks are accepted. All returned checks incur a fee of \$25.00.

4. Vacation for Provider:

New Years Day	Labor Day
Martin Luther Kings Day	Presidents' Day
Caesar Chavez Day	Veterans Day
Good Friday (closed early)	Thanksgiving Day
Memorial Day	Christmas
Fourth of July of July	

No Care will be provided:

The day after Thanksgiving
Christmas Eve
New Years Eve

Two weeks vacation for provider's personal vacation with one month's notice, (usually late summer). Approx. one week vacation (usually winter holiday).

Provider's personal vacation is one half of the weekly fee.

5. Illness Policy:

Child: all illnesses are dealt with on an individual basis depending on the nature of the illness. Serious and contagious illnesses are not allowed. Any child returning must have a doctor's release.

6. Termination of Contract:

This contract may be terminated by parent in writing with a two-week's notice. If the child is withdrawn without proper notice, parent agrees to pay two weeks fee as expected. Provider reserves the right to terminate this contract at any time.

7. Releasing Child:

Your child /children will only be released to parent/guardian or people listed on application.

8. Provider illness/Emergencies:

In case of illness or emergency, provider will put her assistant in charge.

9. Supplies:

All toys, learning material, cots and linen will be supplied by provided.

10. Modification/Amendment:

Provider reserves the right to modify and/or amend this agreement upon two weeks written notice of any changes in the basic rates or service. No amendment or modification hereof shall be valid unless it is in writing and signed by all the parties.

11. Entire Agreement:

This agreement, together with those documents specifically incorporated herein by reference, contains the entire agreement understanding between the parties as to the matter of.

12.Invalid Provisions:

The invalidity or enforceability of any particular provisions hereof shall not affect the other provisions hereof, and this agreement shall be construed in all respects as if such invalid or unenforceable provisions were omitted.

13.Waiver:

No right under this contract shall be waived (lost) merely by delaying or Failing to exercise it. Consent to one act shall not be considered consent to any other or subsequence acts. Any waiver of a default under this agreement must be in writing and shall not be a waiver of any other default concerning the same or any other provision of this agreement.

14.Governing Law:

This agreement shall be governed by and interpreted in accordance with laws of State of California.

15.Social Media:

I give my consent for Clark Family Child Care (CFCC) to photograph or video my child and/or me or use photograph(s) or videos that already exist of my child and/or me that were taken in a childcare setting. I understand that the photographs, digital images, or video segments may be used in print or electronic media and that the photographs may be displayed on websites owned or sponsored by Clark Family Child Care. _____(Initials)

*This contract will be reissued as it is amended and/or updated. The undersigned have read and understand this agreement.

_____Mother _____Date

_____Print

_____Father _____Date

_____Print